

<b>POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	<b>Application Number</b>	10/813,628
	<b>Filing Date</b>	March 31, 2004
	<b>First Named Inventor</b>	Simon Knowles
	<b>Title</b>	APPARATUS AND METHOD FOR....
	<b>Art Unit</b>	2181
	<b>Examiner Name</b>	Richard B. Franklin
	<b>Attorney Docket Number</b>	ICER-321538

I hereby revoke all previous powers of attorney given in the above-identified application.

<input checked="" type="checkbox"/> A Power of Attorney is submitted herewith. OR <input type="checkbox"/> I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith: OR <input type="checkbox"/> I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:	<div style="border: 1px solid black; padding: 10px; text-align: center;">27964</div>										
<table border="1" style="width: 100%;"> <thead> <tr> <th>Practitioner(s) Name</th> <th>Registration Number</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	Practitioner(s) Name	Registration Number									
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☐ Applicant/Inventor.  
OR  
☒ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.71(b) (Form PTO/SB/96) submitted herewith or filed on September 15, 2004

SIGNATURE OF Applicant or Assignee of Record

Signature	Date
Name	Telephone
Title and Company	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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